

POSITION	N	INITIALS	ID NO.	DATE
FEE DETERMINATION				5/3 - 66-61
O.I.P.E. CLASSIFIER			10	5/3
FORMALITY REVIEW		K.C.	105/205	05/30/01
RESPONSE FORMALITY REVIEW		Rm	F-51	01-03-02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	9/2/00
2	1/10/01
3	5/3/03
4	✓
5	
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7	
8	
9	
10	
11	✓
12	0
13	✓
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18	✓✓
19	+=
20	✓
21	✓
22	✓
23	=
24	=
25	=
26	=
27	=
28	✓
29	✓
30	✓
31	0
32	✓
33	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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